## COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My citizenship, residence and post office address are as listed below next to my name.

I believe I am the original, first and [] sole/[x] joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled: **Fusion Receptors Specific for Prostate-Specific Membrane Antigen and Uses Thereof** the specification of which

(a) [X ]	is attached here	eto.			
(b) []	was filed on	as	s Application Serial No.	and w	/as amended on _
(c) []		and claimed in Intern	ational Application No	filed on	and
the clai	ms, as amended ation which is ma	e reviewed and unde I by any amendment		identified spec ge the duty to d	lisclose
365(c) insofar States acknov betwee	of any PCT inter as the subject m or PCT internation vledge the duty to the filing date	national application on the conal application in the conal application in the conal application in the conal archiel in	35 U.S.C. § 120  ted States Code, § 120 of any Usesignating the United States of claims of this application is not demanner provided by the first parameters of the mand the national or PCT interrupts.	America, listed lisclosed in the aragraph of 35 § 1.56 which b	below and, prior United U.S.C. § 112, I ecame available
applica PCT/	US00/09512	April 7, 2000	Pending		
	tion Serial No.)	(Filing Date)	(Status)(patented,pending,abandor	ied) (Pa	tent No. if applicable)
(Application	tion Serial No.)	(Filing Date)	(Status)(patented,pending,abandor	ned) (Pa	atent No. if applicable)

## **Power of Attorney**

I hereby appoint Carl Oppedahl, PTO Reg. NO. 32,746, Marina T. Larson, PTO Reg. No. 32,038, and D'Arcy Straub, Reg. No. 47,113, of the firm of OPPEDAHL & LARSON LLP, having office at P.O. Box 5068, Dillon, CO 80435-5068 as attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

SEND CORRESPONDENCE TO:



021121

PATENT TRADEMARK OFFICE

DIRECT TELEPHONE CALLS TO: OPPEDAHL & LARSON LLP (970)468-6600



## Claim for Priority

I hereby claim foreign priority benefits under 35 U.S.C. § 119 (a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below any foreign applications for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

EARLIEST FOREIGN A SAID APPLICATION	PPLICATION(S), FI	LED WITHIN TWEL	_VE MONTHS (6 M	ONTHS FOR DE	SIGN) PRIOR TO
COUNTRY	APPLICATION NO.	DATE OF FILING (day/month/year)	DATE OF ISSUE (day/month/year)	PRIORITY CLAIMED	CERTIFIED COPY ATTACHED
				YES[]NO[]	YES[]NO[]
FOREIGN APPLICATION(S), IF ANY, FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO SAID APPLICATION					
COUNTRY	APPLICATION NO.	DATE OF FILING (day/month/year)	DATE OF ISSUE (day/month/year)		

## **Provisional Application**

I hereby claim the benefit under 35 U.S.C § 119(e) of any United States provisional application(s) listed below.

60/128,593	April 9, 1999
(application number)	(filing date)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE	LAST NAME	FIRST NAME	MIDDLE NAME
OR FIRST INVENTOR	Rosen	Neal	
RESIDENCE &	CITY OF RESIDENCE	STATE OR COUNTRY OF RESIDENCE	COUNTRY OF CITIZENSHIP
CITIZENSHIP	Englewood		USA
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DATE		SIGNATURE A DOWN	

[X] Signature for additional joint inventor attached. Number of Pages 2

[] Signature by Administrator(trix) or legal representative for deceased or incapacitated inventor. Number of Pages \_\_\_.

[] Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR § 1.47. Number of Pages \_\_\_.

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NAME OF SECOND INVENTOR	LAST NAME Kuduk	FIRST NAME Scott	MIDDLE NAME D.
RESIDENCE & CITIZENSHIP	CITY OF RESIDENCE New York	STATE OR COUNTRY OF RESIDENCE NY	COUNTRY OF CITIZENSHIP USA
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NAME OF THIRD INVENTOR	LAST NAME Danishefsky	FIRST NAME Samuel	MIDDLE NAME J.
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DATE		SIGNATURE Samuela	mo h
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NAME OF FOURTH INVENTOR	LAST NAME Zheng	FIRST NAME Furzhong	MIDDLE NAME F.
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RESIDENCE & CITIZENSHIP  POST OFFICE ADDRESS Office of Industrial A Memorial Sloan Kett 1275 York Avenue	Zheng  CITY OF RESIDENCE  New York  S  ffairs  ering Cancer Center	Furzhong  STATE OR COUNTRY OF RESIDENCE NY  CITY New York	COUNTRY OF CITIZENSHIP CN  STATE/COUNTRY ZIP CODE NY 10021
RESIDENCE & CITIZENSHIP  POST OFFICE ADDRESS Office of Industrial A Memorial Sloan Kett 1275 York Avenue  DATE  NAME OF FIFTH	Zheng  CITY OF RESIDENCE New York  s  ffairs ering Cancer Center   LAST NAME	Furzhong  STATE OR COUNTRY OF RESIDENCE NY  CITY New York  SIGNATURE  FIRST NAME	F.  COUNTRY OF CITIZENSHIP CN  STATE/COUNTRY ZIP CODE NY 10021
RESIDENCE & CITIZENSHIP  POST OFFICE ADDRESS Office of Industrial A Memorial Sloan Kett 1275 York Avenue  DATE  NAME OF FIFTH INVENTOR  RESIDENCE & CITIZENSHIP  POST OFFICE ADDRESS Office of Industrial A	Zheng  CITY OF RESIDENCE New York  S  ffairs ering Cancer Center  LAST NAME Sepp-Lorenzino  CITY OF RESIDENCE New Haven	FUIZHONG  STATE OR COUNTRY OF RESIDENCE NY  CITY New York  SIGNATURE  FIRST NAME Laura  STATE OR COUNTRY OF RESIDENCE	COUNTRY OF CITIZENSHIP CN  STATE/COUNTRY ZIP CODE NY 10021  MIDDLE NAME  COUNTRY OF CITIZENSHIP

NAME OF SIXTH INVENTOR	LAST NAME Ouerfelli	FIRST NAME Ouatek	MIDDLE NAME
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DATE		SIGNATURE	

